

ATTACHMENT 1
(COVER SHEET)

TECHNICAL PROPOSAL PACKET

for

**Request For Proposal # 7027
Monitoring Enterprise Review**

Delta Stewardship Council

Submitted By:

Proposer's Company Name:	
Mailing Address:	
City, State Zip Code:	

Contact Person:	
Phone Number:	
Email Address:	

Date:	
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ATTACHMENT 2
TECHNICAL PROPOSAL PACKET
REQUIRED ATTACHMENT CHECK LIST

Proposer's Company Name: _____

A complete Proposal or Proposal package will consist of the items identified below.

Complete this checklist to confirm the items in your Proposal. Place a check mark or "X" next to each item that you are submitting to the State. For the Proposal to be responsive, all required attachments that are applicable must be returned. This checklist must be returned with your Proposal package also.

<u>Attachment</u>	<u>Attachment Name/Description</u>
<input type="checkbox"/> Attachment 1	Cover Sheet
<input type="checkbox"/> Attachment 2	Required Attachment Checklist
<input type="checkbox"/> Attachment 3	Proposal/Proposer Certification Sheet
<input type="checkbox"/> Attachment 4	Proposer Minimum Qualifications
<input type="checkbox"/> Attachment 5	Evaluation Criteria:
<input type="checkbox"/>	a. Proposer's Understanding of the Scope of Work, Activities & Deliverables
<input type="checkbox"/>	b. Overall Team Composition
<input type="checkbox"/>	c. Qualifications & Experience of the Contractor's Project Director & Project Lead
<input type="checkbox"/>	d. Qualifications & Experience of Subcontractor's Key Personnel
<input type="checkbox"/>	e. Availability and Accessibility
<input type="checkbox"/>	f. Nature of completed and on-going relevant projects
<input type="checkbox"/>	g. Detailed Work Plan, Deliverables and Timelines
<input type="checkbox"/> Attachment 6	STD 843 Disabled Veteran Business Enterprise Declarations (If applicable)
<input type="checkbox"/> Attachment 7	GSPD-05-105 Bidder Declaration
<input type="checkbox"/> Attachment 8	Darfur Contracting Act
<input type="checkbox"/> Attachment 9	California Civil Rights Laws Certification
<input type="checkbox"/> Attachment 10	Contractor Certification Clauses (CCC 04/2017)
<input type="checkbox"/> Attachment 11	Payee Data Record (STD204)

ATTACHMENT 3

PROPOSAL/PROPOSER CERTIFICATION SHEET

This Proposal/Proposer Certification Sheet must be signed and returned along with all the "required attachments" as an entire package in duplicate with original signatures. The Proposal must be transmitted in a sealed envelope in accordance with RFP instructions.

(Do not return any portion of the RFP prior to page 29, page 33, page 57 or the "Sample Agreement".)

- A. Our Proposal is submitted as detailed in the Technical Proposal Packet, Attachments 1 through 11, if applicable and the separate Cost Proposal Packet.
- B. All required attachments are included in Proposer's Proposal package.
- C. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
- D. The signature affixed hereon and dated certifies compliance with all the requirements of this Proposal document. The signature below authorizes the verification of this certification.

An Unsigned Proposal/Proposer Certification Sheet May Be Cause For Rejection

1. Company Name	2. Telephone Number ()	2a. Fax Number ()
3. Address		
E-mail Address:		
5. <input type="checkbox"/> Partnership Indicate your organization type:		
4. <input type="checkbox"/> Sole Proprietorship		
6. <input type="checkbox"/> Corporation		6a. <input type="checkbox"/> L.L.C. Limited Liability Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN)		8. California Corporation No.
9. Indicate applicable license and/or certification information:		
10. Proposer's Name (Print)		11. Title
12. Signature		13. Date
14. Are you certified with the Department of General Services, Office of Small Business and DVBE Certification as:		
a. California Small Business Enterprise Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, enter certification number: _____		a. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, enter certification number: _____
NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".		
Date application was submitted to OSBCR, if an application is pending:		

Completion Instructions for Proposal/Proposer Certification Sheet

Complete the numbered items on the
Proposal/Proposer Certification Sheet by following the instructions below.

Item Numbers	Instructions
1, 2, 2a, 3	Must be completed. These items are self-explanatory.
4	Check if your firm is a sole proprietorship. A sole proprietorship is a form of business in which one person owns all the assets of the business in contrast to a partnership and corporation. The sole proprietor is solely liable for all the debts of the business.
5	Check if your firm is a partnership. A partnership is a voluntary agreement between two or more competent persons to place their money, effects, labor, and skill, or some or all of them in lawful commerce or business, with the understanding that there shall be a proportional sharing of the profits and losses between them. An association of two or more persons to carry on, as co-owners, a business for profit.
6, 6a	Check if your firm is a corporation. A corporation is an artificial person or legal entity created by or under the authority of the laws of a state or nation, composed, in some rare instances, of a single person and his successors, being the incumbents of a particular office, but ordinarily consisting of an association of numerous individuals. Or a Limited Liability Corporation
7	Enter your federal employee tax identification number.
8	Enter your corporation number assigned by the California Secretary of State's Office. This information is used for checking if a corporation is in good standing and qualified to conduct business in California.
9	Complete, if applicable, by indicating the type of license and/or certification that your firm possesses and that is required for the type of services being procured.
10, 11, 12, 13	Must be completed. These items are self-explanatory.
14	If certified as a California Small Business, place a check in the "Yes" box, and enter your certification number on the line. If certified as a Disabled Veterans Business Enterprise, place a check in the "Yes" box and enter your service code on the line. If you are not certified to one or both, place a check in the "No" box. If your certification is pending, enter the date your application was submitted to OSBCR.

ATTACHMENT 4
(Proposer Minimum Qualifications)

Proposer's Company Name: _____

Proposer Minimum Qualifications

Proposer must complete the Proposer Minimum Qualification documentation below and attach the documentation for these four items to this page as the Proposal response to Attachment 4. Proof of the following items must be given as written documentation to qualify for further consideration.

1. Proof of Proposer's Qualified Experience.

The Proposer must provide a written statement of qualifications summarizing how their company has a minimum of ten-years' experience in compiling and organizing a comprehensive inventory of current, on-going and planned monitoring activities, and management and policy planning of monitoring programs. This shall include experience in compiling and organizing monitoring inventory with physical, chemical and biological components, and social and economic drivers of ecosystem function and processes (e.g., effects of land use and recreational fishing on water quality or aquatic communities). This statement of qualifications must include the history of the Proposer's experience, culture, quality, and potential for continued success, the number of years that your company has been in business, project management experience, as well as specialty areas, resources, accomplishments, philosophies with respect to customers and employees, and any other significant items that describe the history, growth, and development of your enterprise. Each Proposer should clearly state the total number of years of experience. Please limit this response to three pages or less. Attach this proof of Proposer's qualified experience to the Technical Proposal Packet, Attachment 4. Minimum Qualifications.

2. Proof of Project Lead's Qualified Experience.

The Proposer must provide 1) a written statement of qualifications summarizing how their Project Lead has a minimum of five years' experience with monitoring programs along with 2) the Project Lead's Resume that indicates his/her experience in project management of monitoring programs, who the clients were for the project for, when the project started and completed, and what the project was about. Attach this proof of Proposer's Project Lead's qualified experience to the Technical Proposal Packet, Attachment 4. Minimum Qualifications.

3. Utilizing Small Business (SB) and Disabled Veteran Business Enterprise (DVBE) Program Goals.

- a. The Proposer must submit a narrative detailing how they will utilize California Small Businesses/ Disabled Veteran Business Enterprises (SB/DVBE) throughout the life of the Agreement.
- b. The Proposer must submit a completed Technical Proposal Packet, Attachment 7, "GSPD-05-105 Bidder Declaration:
 - 1) to the fullest extent as required, and
 - 2) if subcontractors will be used, the subcontractor's name, contact, phone and fax number, address and email address, CA Certification, the work performed for the contract, the corresponding percentage (%) of bid price, and whether their firm or business is in good standing and they own 51% rental.

For more information about California SB/DVBE program goals, please go to the [State Contracting Manual \(SCM\) Volume 1, Chapter 8](#) or to [The Office of Small Business \(SB\) and Disabled Veteran Business Enterprise \(DVBE\) program](#).

NOTE: While SB vendor participation is not mandatory, the Proposer can receive additional incentive points in the evaluation process by utilizing California Small Business subcontractors to accomplish a commercially useful function of the scope of work. In the event, a Proposer does not utilize California DVBE subcontractors nor identify them on the GSPD-05-105 Bidder Declaration, their Proposal will be deemed non-responsive and will not be further evaluated. Attach this narrative on utilizing Small Business (SB) and Disabled Business Enterprise (DVBE) Program Goals to the Technical Proposal Packet, Attachment 4. Minimum Qualifications.

4. Satisfactory References.

The Proposer must provide three (3) satisfactory references from companies or agencies with which the Proposer currently has, or recently have had, contracts. The Proposer shall not provide more than three (3) Satisfactory References nor use COUNCIL as a reference. Proposer must provide these satisfactory references on the form in the Technical Proposal Packet, Attachment 4. "Minimum Qualifications" by completing customers' information, references, and point of contact. Any additional summary regarding the three (3) Satisfactory References shall be limited to three (3) pages maximum.

NOTE: If the Proposer does not provide three (3) Satisfactory References, then the Proposal will be deemed non-responsive and will not be further evaluated. At the commencement of the Technical Evaluation, Proposer's

Satisfactory References will be verified. If any of the references are/were dissatisfied with Proposer's performance, the Proposal will be deemed non-responsive and will not be further evaluated.

5. No Conflict of Interest

Public Contract Code section 10365.5 provides in part as follows: "(a) No person, firm, or subsidiary thereof who has been awarded a consulting services contract may submit a bid for, nor be awarded a contract for, the provision of services, procurement of goods or supplies, or any other related action which is required, suggested, or otherwise deemed appropriate in the end product of the consulting services contract."

The Proposer shall disclose their personal, agency, firm or institution's participation in any Council committee, workgroup or contract that has provided advice on topics, reviews, projects or priorities for funding on the "Conflict of Interest" Statement in Attachment 4 of the Submittal Packet.

In the event that a conflict of interest is determined per this regulation, the Proposer's submittal shall be deemed non-responsive and their submittal packet will not be evaluated further.

Satisfactory References

Proposer must complete the required documentation below as their Proposal response to Attachment 4, Paragraph 4. Satisfactory References. Submission of this attachment is mandatory. Failure to complete and return this attachment with your Proposal will cause your Proposal to be deemed non-responsive. List below three satisfactory references of similar types of consulting services performed. The Proposer shall not provide more than three references nor use COUNCIL as a reference.

REFERENCE 1

Name of Firm:		Email:	
Street Address:	City:	State:	Zip Code:
Contact Person:		Telephone Number:	
Dates of Service:		Value or Cost of Service:	
Brief Description of Service Provided			

REFERENCE 2

Name of Firm:		Email:	
Street Address:	City:	State:	Zip Code:
Contact Person:		Telephone Number:	
Dates of Service:		Value or Cost of Service:	
Brief Description of Service Provided			

REFERENCE 3

Name of Firm:		Email:	
Street Address:	City:	State:	Zip Code:
Contact Person:		Telephone Number:	
Dates of Service:		Value or Cost of Service:	
Brief Description of Service Provided			

Conflict of Interest Statement

(Complete a separate statement for every individual and firms including officers, employees, agents, contractors and subconsultants / subcontractors that are the subject to this RFP/RFO/A&E project.)

Public Contract Code section 10365.5 provides in part as follows:

“(a) No person, firm, or subsidiary thereof who has been awarded a consulting services contract may submit a bid for, nor be awarded a contract for, the provision of services, procurement of goods or supplies, or any other related action which is required, suggested, or otherwise deemed appropriate in the end product of the consulting services contract.”

☐ I declare that I have no Conflict of Interest in participating in Council's RFP project.

☐ I acknowledge any personal, financial, or business interest in past contracts, employment activity or a personal relationship regarding any individuals and firms (including officers, employees, agents, contractors and subconsultants / subcontractors) that are the subject to this RFP project.

List individuals and firms (including officers, employees, agents, contractors and subconsultants / subcontractors), state relationship, when, and current status.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

I hereby attest and certify that by the act of signing my name below, the foregoing Conflict of Interest Statement is true and correct.

Signed this date: _____

Signed: _____

Name: _____

Title: _____

Agency: _____

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 1. PROPOSER'S UNDERSTANDING OF THE SCOPE OF WORK, ACTIVITIES AND DELIVERABLES

Proposer must complete the required documentation below and attach it to this page as the Proposal response to Attachment 5, Item 1. Proposer's Understanding of the Scope of Work, Activities and Deliverables.

RESPOND TO:

Proposer shall provide a summary of the major components to develop and conduct the monitoring enterprise review per the RFP requirements and problems.

Proposer must demonstrate that they understand the desired scope of work and requirements in order to develop and complete Component 1 of the monitoring enterprise review within the context of adaptive management.

Proposer shall provide a thorough outline of the study's process and explanation of the Proposer's approach to achieve the goals and objectives of Component 1 of the monitoring enterprise review.

Proposer must demonstrate that they can provide appropriate deliverables and timelines to satisfactorily complete and achieve the goals and objectives of Component 1 of the monitoring enterprise review within the context of adaptive management.

Must provide a statement regarding how and why their Proposal is reasonable and feasible to satisfactorily complete and achieve the goals and objectives of Component 1 of the monitoring enterprise review within the context of adaptive management.

Please limit these responses to not more than 6 pages.

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 2. Overall Team Composition.

Proposer must complete the required documentation below and attach it to this page as the Proposal response to Attachment 5. Item 2. Overall Team Composition.

RESPOND TO:

Proposer must identify their key personnel and subcontractor's personnel involved in the monitoring enterprise review in the composition charts 1 or 2 as applicable. In these charts, the Proposer shall identify the position titles and number of positions required to complete the entire project. Proposer shall submit a written Statement of Qualifications for both Proposer's and their subcontractor's Key Staff.

- 1) The following Proposer's Key personnel positions are proposed for the monitoring enterprise review services:

Position Title	# of Positions	Role in the Monitoring Enterprise Review

(Note: Expand table as necessary to identify all Contractor's key personnel positions involved in the entire project)

Resumes for the Proposer's Key Personnel shall be attached to this section's response.

- 2) The Proposer shall identify their subcontractor personnel involved in the monitoring enterprise review. Proposer shall identify their subcontractor's name, address, phone and email, their subcontractor's personnel position titles number of positions required to complete the entire project, and their role in the Monitoring Enterprise Review.

Name of Contractor's Subcontractor	Address		Phone & Email
Position Title	# of Positions	Role in the Monitoring Enterprise Review	

(Note: The format above shall be used to identify each Proposer's subcontractors to be used. As necessary, expand table to identify all Proposer's subcontractors and their personnel positions involved in the entire project.)

Resumes for the Contractor's Key Subcontractor's Personnel shall be attached to this section's response.

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 3. Qualifications and Experience of the Project Director and Project Lead

Proposer must complete the required documentation below as their Proposal response to Attachment 5, Item 3. Qualifications and Experience of the Project Director and Project Lead.

RESPOND TO:

The Proposer must provide a written Statement of Qualifications summarizing the Project Director's and the Project Lead's ability and experience with monitoring programs, as well as governance and management of monitoring programs. Please limit this response to three pages or less.

Resumes provided for the Proposer's Project Director and Project Lead in Item 2 shall be also evaluated as part of Item 3.

(NOTE: Per the Minimum Qualifications, the Project Lead must have a minimum of five years' experience with monitoring programs.)

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 4. Qualifications and Experience of Subcontractor's Key Staff.

Proposer must complete the required documentation below as their Proposal response to Attachment 5, Item 4. Qualifications and Experience of Subcontractor's Key Personnel.

RESPOND TO:

The Proposer must provide a written Statement of Qualifications summarizing each Subcontractor's Key Staff qualifications and experience.

Resumes provided for each Subcontractor's Key Staff in Item 2 shall be also evaluated as part of Item 4.

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 5. Availability and Accessibility.

Proposer must complete the required documentation below as their Proposal response to Attachment 5, Item 5. Availability and Access.

RESPOND TO:

The Proposer must demonstrate to COUNCIL that they have availability and accessibility to complete the monitoring enterprise review.

Proposer must provide a written statement regarding the availability of the Project Director, Lead and the proposed team to respond to the Delta ISB requirements.

Proposer must provide a written statement regarding the accessibility of the Delta ISB to the Proposer's Project Director and Lead regarding the monitoring enterprise review requirements.

Please limit this response to three pages or less.

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ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 6. Nature of completed and on-going relevant projects.

Proposer must complete the required documentation below as their Proposal response to Attachment 5, Item 6. Nature of completed and on-going relevant projects.

RESPOND TO:

The Proposer must demonstrate to COUNCIL that they have either completed or have on-going relevant projects similar to the Delta ISB's desired monitoring enterprise review.

Proposer shall provide a written statement outlining past and on-going assessment, design, or review of monitoring programs including any COUNCIL, other state, federal and local monitoring programs or projects.

Proposer must provide a written statement whether these would impact the Delta ISB's desired monitoring enterprise review.

Please limit this response to three pages or less.

ATTACHMENT 5
(TECHNICAL EVALUATION CRITERIA)

Proposer's Company Name: _____

Item 7. Effective Detailed Work Plan, Deliverables and Timelines

Proposer must complete the required documentation below and attach it to this page as the Proposal response to Attachment 5, Item 7. Effective Work Plan, Deliverables and Timelines.

COUNCIL must base its decision on whether Proposer's Detailed Work Plan, Deliverables and Timelines provide complete and effective procedures to complete the requirements necessary to perform the required monitoring enterprise review desired by Delta ISB.

RESPOND TO:

The Proposer must submit a Detailed Work Plan, Deliverables and Timeline for each Section as described in Section 4. Technical Proposal Requirement, Item 7. Effective Detailed Work Plan, Deliverables and Timelines.

ATTACHMENT 6
(If applicable)

STD 843 Disabled Veteran Business Enterprise Declarations

Proposers who are disabled veteran (DV) owner(s) and DV manager(s) of a Disabled Veteran Business Enterprise must complete **STD 843** Disabled Veteran Business Enterprise Declarations when a DVBE Contractor or subcontractor will provide materials, supplies, services or equipment and include it with the Proposal response.

The Disabled Veteran Business Enterprise Declarations form can be found at the following link: [STD 843](#)

If you do not have internet access, please contact Leslie Cary at (916) 445-7640.

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ATTACHMENT 7

BIDDER DECLARATION FORM (GSPD-05-105)

All Proposers' must complete the Bidder Declaration Form (GSPD-05-105) and include it with the Proposal response.

The Bidder Declaration Form can be found at the following link: [GSPD-05-105](#)

If you do not have internet access, please contact Leslie Cary at (916) 445-7640.

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ATTACHMENT 8

DARFUR CONTRACTING ACT

All Proposers' must complete the Darfur Contracting Act form and include it with the Proposal response.

The form is available at the following link: [Darfur Contracting Act](#)

If you do not have internet access, please contact Leslie Cary (916) 445-7640.

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ATTACHMENT 9
Civil Right Certification

CALIFORNIA CIVIL RIGHTS LAWS CERTIFICATION

All Proposers' must complete the California Civil Rights Laws Certification form and include it with the Proposal response.

The form is available at the following link: [California Civil Rights Laws Certification](#)

If you do not have internet access, please contact Leslie Cary at (916) 445-7640.

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ATTACHMENT 10

CONTRACTOR CERTIFICATION CLAUSES (CCC 04/2017)

All Proposers' must complete the Contractor Certification Clauses Form (CCC 04/2017) and include it with the Proposal response.

The Contractor Certification Clauses Form is available at the following link: [CCC 04/2017](#)

If you do not have internet access, please contact Leslie Cary at (916) 445-7640.

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ATTACHMENT 11

PAYEE DATA RECORD (STD204)

All Proposers' must complete the Payee Data Record (STD204) and include it with the Proposal response.

The Payee Data Record is available at the following link: [STD204](#)

When the form is submitted, COUNCIL will complete Section 6.

If you do not have internet access, please contact Leslie Cary (916) 445-7640.

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ATTACHMENT 1
(COVER SHEET)

COST PROPOSAL PACKET

for

**Request For Proposal # 7027
Monitoring Enterprise Review**

Delta Stewardship Council

Submitted By:

Proposer's Company Name:	
Mailing Address:	
City, State Zip Code:	

Contact Person:	
Phone Number:	
Email Address:	

Date:	
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ATTACHMENT 2
COST PROPOSAL PACKET
REQUIRED ATTACHMENT CHECK LIST

Proposer's Company Name: _____

A complete Proposal or Proposal package will consist of the items identified below.

Complete this checklist to confirm the items in your Proposal. Place a check mark or "X" next to each item that you are submitting to the State. For the Proposal to be responsive, all required attachments that are applicable must be returned. This checklist must be returned with your Proposal package also.

	<u>Attachment</u>	<u>Attachment Name/Description</u>
<input type="checkbox"/>	Attachment 1	Cover Sheet
<input type="checkbox"/>	Attachment 2	Required Attachment Checklist
<input type="checkbox"/>	Attachment 3	Budget Summary
<input type="checkbox"/>	Attachment 4	Budget Detail
<input type="checkbox"/>	Attachment 5	Rate Sheet

ATTACHMENT 3
BUDGET SUMMARY

Proposer's Company Name: _____

1. The "Budget Summary" will be used for computing the COST EVALUATION for this RFP and is not binding on the contracting agency.
2. Proposer must complete the "Budget Summary" form, and include it with the Cost Proposal Packet response.
 - a. Employee Hourly Pay Rate, Benefits, Overhead, Other Expenses and Profit shall be included in each Activity's cost and cannot be charged separately or additionally.
 - b. All Activity's Cost must be combined for the Total Cost of the Monitoring Enterprise Review.
 - c. The actual costs quoted in the Proposal's Budget Summary, Detail and Rate Sheet shall be binding on the winning Proposer for the term of the Agreement. The Budget Summary will be incorporated into the Awarded Proposer's STD 213 Agreement.

Activity	Detailed Work Plan, Deliverables and Timelines	Cost
1	Review of Prior Monitoring and Methods Used	\$
2	Inventory of Delta Monitoring Activities & Initial Analysis and Review	\$
3	Communications with the Delta ISB including: <ul style="list-style-type: none">• Provide and present 3 interim reports to the Delta ISB.• Present and provide 3 final reports to the Delta ISB.• Final Presentation to the Delta ISB.	\$
TOTAL COST OF THE MONITORING ENTERPRISE REVIEW		\$

Statement of Compliance:

The prospective Proposer's signature affixed hereon and dated shall constitute a certification, under the penalty of perjury under the laws of the State of California, that the bidder/proposer has, unless exempted, complied with the nondiscrimination program requirements of Government Code section 12990 (a - f) and of Title 2, California Code of Regulations, section 8113. (See SCM 4)

Submitted by: _____ Date: _____

Title: _____

Contact Name / Title:	
Company Name:	
Company Address:	
Telephone Number:	
Fax Number:	
E-Mail Address:	

**ATTACHMENT 4
BUDGET DETAIL**

Proposer's Company Name: _____

Proposer must complete the "Budget Detail" form, and include it with the Cost Proposal Packet response. The Budget Detail is a more detailed version of the Budget Summary for each Activity and the Total Cost for each much match. The Budget Detail will be incorporated into the Awarded Proposer's STD 213 Agreement.

BUDGET DETAIL

	Estimated Total
Activity 1: Prior Monitoring Reviews and Methods Used	
Key Personnel and Staff (Includes salaries and benefits)	\$
Subcontractor's Key Personnel and Staff (Includes salaries and benefits)	\$
Travel and Meetings (Travel expenses and per diem shall be billed in accordance with established state rates.)	\$
Total for Activity 1	\$
Activity 2: Inventory of Delta Monitoring Activities & Initial Analysis and Review	
Key Personnel and Staff (Includes salaries and benefits)	\$
Subcontractor's Key Personnel and Staff (Includes salaries and benefits)	\$
Travel and Meetings (Travel expenses and per diem shall be billed in accordance with established state rates.)	\$
Total for Activity 2	\$
Activity 3: Communications with the Delta ISB	
Key Personnel and Staff (Includes salaries and benefits)	\$
Subcontractor's Key Personnel and Staff (Includes salaries and benefits)	\$
Travel and Meetings (Travel expenses and per diem shall be billed in accordance with established state rates.)	\$
Total for Activity 3	\$
Combined Total Budget Detail	\$

Statement of Compliance:

The prospective Proposer's signature affixed hereon and dated shall constitute a certification, under the penalty of perjury under the laws of the State of California, that the bidder/proposer has, unless exempted, complied with the nondiscrimination program requirements of Government Code section 12990 (a - f) and of Title 2, California Code of Regulations, section 8113. (See SCM 4)

Submitted by: _____ Date: _____

Title: _____

Contact Name / Title:	
Company Name:	
Company Address:	
Telephone Number:	
Fax Number:	
E-Mail Address:	

ATTACHMENT 5
RATE SHEET

Proposer's Company Name: _____

The following table for the Rate Sheet must reflect the Position Titles and Hourly Pay Rate for Contractor's staff and Contractor's subcontractor staff. Expand table as necessary. The Rate Sheet will be incorporated into the Awarded Proposer's STD 213 Agreement.

RATE SHEET

Contractor:		
	Position Title	Hourly Pay Rate
		\$ per hour
		\$ per hour
		\$ per hour
		\$ per hour
		\$ per hour
Contractor's Subcontractor 1:		
	Position Title	Hourly Pay Rate
		\$ per hour
		\$ per hour
		\$ per hour
		\$ per hour
Contractor's Subcontractor 2:		
	Position Title	Hourly Pay Rate
		\$ per hour
		\$ per hour
		\$ per hour
		\$ per hour

Statement of Compliance:

The prospective Proposer's signature affixed hereon and dated shall constitute a certification, under the penalty of perjury under the laws of the State of California, that the bidder/proposer has, unless exempted, complied with the nondiscrimination program requirements of Government Code section 12990 (a - f) and of Title 2, California Code of Regulations, section 8113. (See SCM 4)

Submitted by: _____ Date: _____

Title: _____

Contact Name / Title:	
Company Name:	
Company Address:	
Telephone Number:	
Fax Number:	
E-Mail Address:	